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February 11, 2004

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Please note the above Antoinette Tease will not longer represent me in any way in regards to the US Patent Application.

Representative Designation
Primary

Registration Number
#53680

All Correspondence shall go to myself Lorie Trump at the above address.

Sincerely,


Lorie Trump

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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	registration # 53680
Filing Date	1-15-04
First Named Inventor	Lorie L. Trump
Art Unit	
Examiner Name	
Attorney Docket Number	TRV04-0001

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☐ Please change the correspondence address for the above-identified application to:

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OR

no longer: Antoinette Tease P.L.L.C.

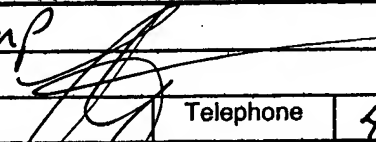
<input checked="" type="checkbox"/> Firm or Individual Name	Lorie Trump				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Lorie Trump		
Signature			
Date	2-11-04	Telephone	406-896-2238

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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